# MULTIPLE DEPENDENT CLAIM
## FEE CALCULATION SHEET
### (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/538113  
FILING DATE  
APPLICANT(S)

## CLAIMS

| | AS FILED | | AFTER 1ˢᵗ AMENDMENT | | AFTER 2ⁿᵈ AMENDMENT | |
|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | | | | |
| 2 | | 1 | | | | |
| 3 | | 1 | | | | |
| 4 | | 1 | | | | |
| 5 | | 1 | | | | |
| 6 | | 1 | | | | |
| 7 | | 1 | | | | |
| 8 | | 1 | | | | |
| 9 | | 1 | | | | |
| 10 | 1 | | | | | |
| 11 | | 1 | | | | |
| 12 | | 1 | | | | |
| 13 | 1 | | | | | |
| 14 | | 1 | | | | |
| 15 | 1 | | | | | |
| 16 | | 1 | | | | |
| 17 | 1 | | | | | |
| 18 | 1 | | | | | |
| 19 | | 1 | | | | |
| 20 | | 1 | | | | |
| 21 | | 1 | | | | |
| 22 | | 1 | | | | |
| 23 | 1 | | | | | |
| 24 | | 1 | | | | |
| 25 | | 1 | | | | |
| 26 | 1 | | | | | |
| 27 | | | | | | |
| 28 | 1 | | | | | |
| 29 | | 1 | | | | |
| 30 | 1 | | | | | |
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| TOTAL IND. | 10 | | | | | |
| TOTAL DEP. | 20 | | | | | |
| TOTAL CLAIMS | 30 | | | | | |

| | AS FILED | | AFTER 1ˢᵗ AMENDMENT | | AFTER 2ⁿᵈ AMENDMENT | |
|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 100 | | | | | | |
| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |

PTO - 1360 (REV. 11/04)